

**HOME AND COMMUNITY BASED CARE WAIVERS:
INDIVIDUAL AND FAMILY DEVELOPMENTAL DISABILITIES SUPPORT (DD) WAIVER**

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DESCRIPTION

The DD Waiver serves individuals age six and older with related conditions who, without DD Waiver Services, would otherwise require placement in an ICF/MR Facility. Pre-admission assessments are completed by Child Development Clinics through local Health Departments and authorization is given by the Department of Medical Assistance Services (DMAS). The waiver year runs from July 1st through June 30th.

DMAS staff conduct utilization reviews of DD Waiver Services. All service preauthorizations and recipient level of care reassessments are performed by DMAS staff. Consumer Service Plans are completed by the Support Coordinator chosen by the recipient and authorization is given by DMAS.

WAIVER INFORMATION¹

Service	Covered Services	Excluded Services	Pre-Screening and Authorization	Billing	Current Rates	
					NOVA	ROS
Skilled Nursing	Services of licensed nurses- RN and LPN- provided for individuals with serious medical conditions and complex health care needs that require specific skilled nursing services that cannot be provided by non- nursing personnel. May be provided in the home, or other community setting on a regularly scheduled or intermittent need basis. To include consultation and training for other providers of services.	Medical care needs that can be accessed under the State Plan for Medical Assistance. May not be provided by the parents of the individuals who are minors, the individuals spouse or individuals foster care provider.	Authorization is provided by the prior authorization contractor. Medical care needs must require specific skilled nursing services ordered by a Physician.	Reimbursement is made for the number of hours the recipient received skilled nursing services.	<u>RN:</u> \$31.50/hour <u>LPN:</u> \$27.30/hour	<u>RN:</u> \$25.94/hour <u>LPN:</u> \$22.52/hour
Personal Care	Services of personal care aides who assist with the recipient's activities of daily living such as bathing, dressing, transferring, ambulating and meal preparation. Can be agency-directed or consumer-directed.	<ul style="list-style-type: none"> • Transportation services. • Skilled services requiring professional skills or invasive therapies. • Services provided to other members of the household 	Pre-Screening completed by a Preadmission Screening Team. Authorization is provided by the prior authorization contractor.	Reimbursement is made for the number of hours that the personal care aide rendered for the recipient.	<u>Agency-directed:</u> \$14.05/hour <u>Consumer-directed:</u> \$10.61/hour	<u>Agency-directed:</u> \$11.93/hour <u>Consumer-directed:</u> \$8.19/hour
Respite Care	Reimbursement for personal care aides or LPNS' who perform respite care and skilled respite care and other activities. Differs from Personal Care in that the goal is for the relief of the caregiver. Services are limited to 720 hours per calendar year.	<ul style="list-style-type: none"> • Transportation services. • Skilled services requiring professional skills or invasive therapies. • Services provided to other members of the household. 	Pre-Screening completed by a Preadmission Screening Team. Preauthorization contractor began in 2001.	Reimbursement is made for the number of hours the recipient received respite care.	<u>Agency-directed:</u> \$14.05/hour <u>Consumer-directed:</u> \$10.61/hour	<u>Agency-directed:</u> \$11.93/hour <u>Consumer-directed:</u> \$8.19/hour
Companion Care	Provision of non medical care, socialization or support to an adult(18YO or older). Assistance with meals preparation, community access and activities, laundry, shopping and light housekeeping.	Limit of 8 hours per 24 hour day. Skilled services requiring professional skills or invasive therapies. Services provided to other members in the same household.	Authorization is provided by the prior authorization contractor.	Reimbursement is made for the number of hours the recipient received companion care.	<u>Agency-directed:</u> \$14.05/hour <u>Consumer-directed:</u> \$10.61/hour	<u>Agency-directed:</u> \$11.93/hour <u>Consumer-directed:</u> \$8.19/hour
Personal Emergency Response System (PERS)	An electronic device that enables certain recipients at high risk of institutionalization to secure help in an emergency through the provision of a two-way voice communication system that dials a 24-hour response or monitoring center upon activation and via the recipient's home telephone line.	A recipient cannot receive supervision hours on the plan of care.	Pre-Screening completed by a Preadmission Screening Team. Preauthorization began in 2002.	Reimbursements for a one-time installation and a monthly monitoring fee.	<u>Installation:</u> \$59.21/hour <u>Monthly Monitoring</u> \$35.40/hour	<u>Installation:</u> \$50.18/hour <u>Monthly Monitoring</u> \$30.00/hour
PERS Medication Monitoring	An electronic device that enables certain recipients at high risk of institutionalization to be reminded to take their medications at the correct dosages and times.	A recipient cannot receive supervision hours on the plan of care.	Pre-Screening completed by a Pre admission Screening Team. A recipient must have the PERS unit to qualify.	Reimbursements for a one-time installation, a monthly monitoring fee, and a nurse to fill the unit with medication.	<u>Installation:</u> \$88.50/hour <u>Monthly Monitoring</u> \$59.00/hour <u>RN Services:</u> \$15.00/hour <u>LPN Services:</u> \$13.00/hour	<u>Installation:</u> \$75.00/hour <u>Monthly Monitoring</u> \$50.00/hour <u>RN Services:</u> \$12.25/hour <u>LPN Services:</u> \$10.25/hour

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WAIVER INFORMATION, CONT.					
Consumer-Directed Services Facilitation	Responsible for monitoring the ongoing provision of all Consumer Directed services.	A recipient with a severe cognitive impairment, as defined by DMAS, must have a primary caregiver manage his/her care and employee.	Pre-Screening completed by a Preadmission Screening Team. Authorization is provided by the prior authorization contractor	Services Facilitation is billed using procedure codes to indicate the type of service provided.	<u>Comprehensive Visit:</u> \$219.45 \$169.05 <u>Routine Visit:</u> \$68.25 \$52.50 <u>Reassessment Visit:</u> \$110.25 \$84.00 <u>Consumer Training:</u> \$218.40 \$168.00 <u>Management Training:</u> \$27.30 \$21.00 <u>Criminal Record Check:</u> \$15.00 each <u>CPS Registry:</u> \$5.00 each
Crisis Stabilization	Direct intervention to strengthen the current living situation and assist individuals to remain living in the community. Services may include neuro-psychiatric, psychiatric, psychological, and other functional assessments and stabilization techniques.	May only occur after an initial face to face assessment by a qualified DD professional. Extensions beyond allowable 15 days must be prior authorized following a documented face to face reassessment by a qualified MR professional.	Must have a face to face assessment prior to services. Preauthorization required and performed by the PA contractor.	Billing is for one hour in 15 day increments but not to exceed 60 days in a calendar year.	<u>Intervention:</u> \$85.05
Crisis Supervision	Crisis Supervision may be provided as a component of Crisis Stabilization services only if clinical or behavioral interventions allowed under this service are also provided during the authorized period. Crisis Supervision must be provided one-to-one and face-to-face with the individual. It may be provided by the same provider of Crisis Stabilization, Clinical or Behavioral services, or a different provider.	Must be one to one and face to face by a qualified DD professional. Not for continuous long term care. Room and board are not a component of this service.	Must have a face to face assessment prior to services. Preauthorization required and performed by the prior authorization contractor.	Billing is hourly service units.	<u>Supervision:</u> \$23.10
Supported Employment	Supported Employment means work in settings in which persons without disabilities are typically employed. It is especially designed for individuals with developmental disabilities facing severe impediments to employment due to the nature and complexity of their disabilities, irrespective of age or vocational potential. This service may be authorized as individual placement or enclave.	Service in combination with prevocational and day support services is limited to 780 units per plan year.	Authorization is provided by the prior authorization contractor.	Billing is for the number of hours for services rendered.	<u>Individual Placement:</u> \$16.80 <u>Enclave/Work Crew:</u> \$34.13
Pre-Vocational Services	Services to prepare an individual for unpaid/paid employment, but are not job task oriented. Provided for individuals who are not expected to join the general work force without support or participation in the transitional/sheltered year of beginning of waiver services. May be center or non center based care.	Service in combination with Supported Employment and Day Support services is limited to 780 units per plan year.	Authorization is provided by the prior authorization contractor.	Billing is for the number of units for services rendered.	<u>Regular Intensity:</u> \$25.19 <u>High Intensity:</u> \$35.86
Therapeutic Consultation	Therapeutic Consultation provides expertise, training, and technical assistance in specific specialty areas to assist family members, caregivers, and other service providers in supporting the individual.	Can not be billed solely for the purpose of monitoring.	Authorization is provided by the prior authorization contractor.	Billing is per hours for services rendered.	\$52.50/hour

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In-Home Residential Support	Residential support services -training and assistance or specialized supervision provided primarily in the individual's home or a DMHMRSA licensed home or approved residence considered to be his home, to enable the individual to maintain health, developed skills in activities or daily living and safety in the use of community resources and adapting their behavior to community and home environments.	Can't be used to provide respite for family members.	Authorization is provided by the prior authorization contractor.	Billing is per hours for services rendered.	<u>Individual</u> \$18.90
Day Support	Day Support services include training, assistance or specialized supervision for the acquisition, retention or improvement in self-help, socialization and adaptive skills. It allows peer interactions and an opportunity for community and social integration. Specialized supervision provides staff presence for ongoing or intermittent intervention to ensure an individual's health and safety. This service may be authorized at regular intensity or high intensity, either center based or non-center based.	Can not be performed in an individuals home or residential setting without written approval. Transportation can not exceed 25% of the total hours billed per day.	Authorization is provided by the prior authorization contractor.	Billing is per unit for services rendered.	Regular Intensity, Center-Based \$25.19 Regular Intensity, Non-Center-Based \$25.19 High Intensity, Center-Based \$35.86 High Intensity, Non-Center-Based \$35.86
Environmental Modifications	Reimbursement for physical adaptations to a house, or place of residence, vehicle used by the individual and the work place when it provides for direct medical or remedial benefit.	Must receive one other waiver service in addition to Case Management. Maximum limit of \$5000.00 per plan year. Cannot be carried over from plan to plan.	Authorization is provided by the prior authorization contractor.	Billing is for one unit and for the preauthorized determination	Limited to \$5,000 per calendar year per individual.
Assistive Technology	Assistive Technology is specialized medical equipment, and supplies, devices, controls, and appliances, not available under the State Plan for Medical Assistance, which enable individuals to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live, or which are necessary to their proper functioning. Assistive technology devices are expected to be portable.	Must receive one other waiver service and may be provided in a residential or non residential setting. Maximum limitation is \$5000.00 per plan year and can not be carried over from plan to plan year. Can't be used for the convenience of the caregiver or as a restraint.	Authorization is provided by the prior authorization contractor.	Billing is for one unit and for the preauthorized determination	Limited to \$5,000 per calendar year per individual.
Family/Care-giver Training	Services are provided by professionals who are qualified to train families and educate relatives to disabilities, community integration, family dynamics, stress management, behavior intervention, and mental health of parent, other family members or primary caregiver.	Doesn't pay for medical supplies, transportation services, or non-training activities.	Authorization is provided by the prior authorization contractor.	Reimbursement is billed hourly and must be prior authorized. Families may receive up to 80 hours of family/caregiver training per plan of care year.	\$44.63/hour

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RECIPIENT AND PAYMENT DATA²

	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005
Skilled Nursing										
Number of Recipients						0	2	2	3	2
Payments						\$0	\$3,417	\$48,193	\$96,654	\$37,099
Cost per Recipient						\$0	\$1,709	\$24,097	\$32,218	\$18,550
Agency-Directed Personal Care										
Number of Recipients						4	13	27	30	36
Payments						\$4,984	\$119,583	\$431,139	\$472,942	\$645,426
Cost per Recipient						\$1,246	\$9,199	\$15,968	\$15,765	\$17,929
Consumer-Directed Personal Care										
Number of Recipients						0	33	127	170	166
Payments						\$0	\$0	\$1,154,467	\$1,764,654	\$2,177,600
Cost per Recipient						\$0	\$0	\$9,090	\$10,380	\$13,118
Agency-Directed Respite Care										
Number of Recipients						2	6	14	15	20
Payments						\$956	\$11,914	\$18,980	\$39,969	\$38,041
Cost per Recipient						\$478	\$1,986	\$1,356	\$2,665	\$1,902
Consumer-Directed Respite Care										
Number of Recipients						0	34	163	224	186
Payments						\$0	\$0	\$481,191	\$552,552	\$632,607
Cost per Recipient						\$0	\$0	\$2,952	\$2,467	\$3,401
Agency-Directed Companion Care										
Number of Recipients						0	1	3	4	7
Payments						\$0	\$2,812	\$25,886	\$32,407	\$58,106
Cost per Recipient						\$0	\$2,812	\$8,629	\$8,102	\$8,301
Consumer-Directed Companion Care										
Number of Recipients						0	0	0	0	2
Payments						\$0	\$0	\$0	\$0	\$608
Cost per Recipient						\$0	\$0	\$0	\$0	\$304
PERS										
Number of Recipients						1	9	18	29	27
Payments						\$110	\$800	\$3,260	\$6,790	\$7,200
Cost per Recipient						\$110	\$89	\$181	\$234	\$267
PERS Medication Monitoring										
Number of Recipients						0	0	3	3	0
Payments						\$0	\$0	\$875	\$820	\$0
Cost per Recipient						\$0	\$0	\$292	\$273	\$0
CD Services Facilitation										
Number of Recipients						0	0	141	168	246
Payments						\$0	\$0	\$79,224	\$29,301	\$97,284
Cost per Recipient						\$0	\$0	\$562	\$174	\$395
Crisis Stabilization³										
Number of Recipients						0	1	3	4	0
Payments						\$0	\$1,722	\$30,819	\$5,365	\$0
Cost per Recipient						\$0	\$1,722	\$10,273	\$1,341	\$0

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RECIPIENT AND PAYMENT DATA, CONT.

	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005
Crisis Supervision³										
Number of Recipients						0	0	0	4	0
Payments						\$0	\$0	\$0	\$58,014	\$0
Cost per Recipient						\$0	\$0	\$0	\$14,504	\$0
Supported Employment										
Number of Recipients						0	1	1	4	5
Payments						\$0	\$683	\$8,113	\$21,620	\$53,268
Cost per Recipient						\$0	\$683	\$8,113	\$5,405	\$10,654
Pre-Vocational Services³						N/A	N/A	N/A	N/A	N/A
Number of Recipients										
Payments										
Cost per Recipient										
Therapeutic Consultation										
Number of Recipients						3	9	24	23	31
Payments						\$350	\$4,300	\$20,005	\$12,300	\$13,975
Cost per Recipient						\$117	\$478	\$834	\$535	\$451
In-Home Residential Support										
Number of Recipients						6	33	82	106	124
Payments						\$14,364	\$315,873	\$876,645	\$1,311,265	\$1,894,497
Cost per Recipient						\$2,394	\$9,572	\$10,691	\$12,370	\$15,278
Day Support										
Number of Recipients						0	15	24	25	26
Payments						\$0	\$60,205	\$132,108	\$104,161	\$176,247
Cost per Recipient						\$0	\$4,014	\$5,505	\$4,166	\$6,779
Environmental Modifications										
Number of Recipients						0	27	41	31	42
Payments						\$0	\$107,285	\$136,922	\$116,518	\$179,905
Cost per Recipient						\$0	\$3,974	\$3,340	\$3,759	\$4,283
Assistive Technology										
Number of Recipients						0	44	52	43	71
Payments						\$0	\$124,929	\$133,955	\$96,194	\$164,705
Cost per Recipient						\$0	\$2,839	\$2,576	\$2,237	\$2,320
Family/Caregiver Training										
Number of Recipients						0	0	11	24	31
Payments						\$0	\$0	\$7,735	\$15,476	\$17,430
Cost per Recipient						\$0	\$0	\$703	\$645	\$562
TOTAL SERVICES										
Number of Recipients						14	124	241	270	338
Payments						\$20,764	\$753,523	\$3,589,517	\$4,737,002	\$6,193,998
Cost per Recipient						\$1,483	\$6,077	\$14,894	\$17,544	\$18,325

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Notes:

- (1) IFDDS Waiver Services Manual.
- (2) Recipient and expenditures data sources include the CMS 372 Report series "Annual Report on Home and Community-Based Waivers", the DMAS CD Payroll database, and claims summary information from off-line payments.
- (3) Reliable expenditure data and unduplicated counts of recipients for this service are not available for FY 2005..